


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 18, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000128218  
 1. Entity Name  
 RICHARD B. MARKS, P.A.



Principal Place of Business      Mailing Address  
 3505 OAKS WAY                      3505 OAKS WAY  
 SUITE 112                              SUITE 112  
 POMPANO BEACH, FL 33069      POMPANO BEACH, FL 33069



**DO NOT WRITE IN THIS SPACE**

01292005      No Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
 47-0898438      Not Applicable

5. Certificate of Status Desired            \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MAHONEY, ROBERT F  
 7777 GLADES ROAD  
 SUITE 209  
 BOCA RATON, FL 33434

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.            \$5.00 May Be Added to Fees

00000128218  
 02/18/05-80001-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARKS, RICHARD B
STREET ADDRESS	3505 OAKS WAY SUITE 112
CITY - ST - ZIP	POMPANO BEACH, FL 33069
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Richard Marks      Date 1/31/05      Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR